



GUILDFORD RURAL DISTRICT

ANNUAL REPORT

OF THE

MEDICAL OFFICER OF HEALTH

FOR THE YEAR

1939

TOGETHER WITH THE ANNUAL REPORT
OF THE SANITARY INSPECTOR.

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GUILDFORD RURAL DISTRICT COUNCIL.

STAFF OF THE PUBLIC HEALTH DEPARTMENT.

Medical Officer of Health:

⁺J.E. HAINE, M.B., Ch.B., D.P.H.

Assistant
Medical Officer of Health:

⁺P.D. MULKERN, M.R.C.S., L.R.C.P.
(20.2.39. to 30.9.39.).

Sanitary Engineer and Surveyor and
Chief Sanitary Inspector:

J.W. WILTON, F.S.I., M.Inst.M. & Cy.E.

Deputy Chief Sanitary Inspector:

S. BEELS, M.S.I.A.,
Cert. S.I.B., R.S.I.Cert. for Meat
Inspection.

No.2 District:

E.A. SMITH, M.S.I.A., A.R.San.I.,
A.Inst.S.E.
Cert.S.I.B., R.S.I.Cert. for Meat Inspection,
R.S.I. Cert. for Hygiene and Sanitation.

No.3 District:

K.H. LYNAS, M.S.I.A., A.R. San.I.,
Cert. S.I.B., R.S.I.Cert. for Meat Inspection,
R.S.I. Cert. for Smoke Inspectors.

Clerical Staff:

Health Department:

⁺C.B. STUART (Chief Clerk).

⁺Miss M.E. HUMPH.

⁺Miss N.N. STANNARD. Miss J.W. ARLETT.

Surveyor and Chief Sanitary Inspector's Department:

G.H.C. TAYLOR (Chief Clerk).

Miss G. SMITH. Miss D. ANSELL.

+ = Also acts in similar capacity for the Hambledon
Rural District and Haslemere Urban District.

GUILDFORD RURAL DISTRICT COUNCIL.

Public Health Department,
Millmead House,
Guildford.

November, 1940.

To the Chairman and Members of the Guildford
Rural District Council.

Mr. Chairman, Ladies and Gentlemen,

The accompanying Report on the work done during the year 1939 is prepared on the lines suggested by the Ministry of Health, and should be regarded as an Interim Report.

It will, I hope, be appreciated that the preparation of the Annual Report in its usual form is impossible this year. The duties of the Medical Officer of Health have been enormously increased, particularly through greater concentration on A.R.P. work, Evacuation, and other problems directly associated with war conditions. Early in 1939 it was realised that, unless an Assistant Medical Officer could be employed it would be impossible for me to get a really efficient Casualty Services Scheme into working order. In consequence, Dr. P.D. Mulkern was appointed as Temporary Assistant M.O.H., for a period of seven months. Now, whilst no assistance is provided it is impossible to carry out many of the duties to my own satisfaction, whilst others have necessarily to be neglected. Attention has been concentrated on matters essential to the general health of the public, such as Water Supplies and Milk Supplies.

The general health of the District has remained good despite the increased population, the overcrowding caused by Military billeting and Civil Evacuation, the overcrowding of the schools, and other adverse factors. At the same time, it must be recognised that this happy state of affairs cannot be expected necessarily to continue without interruption.

Yours faithfully,

J.E. HAINE,

Medical Officer of Health.

STATISTICS AND SOCIAL CONDITIONS OF THE AREA.

SUMMARY.

	<u>1939.</u>	<u>1938.</u>
Area in Acres	59,782	59,782
Estimated resident population in July (estimate supplied by Registrar-General)	35,970	34,940
Number of Inhabited Houses (end of year) ;..		
according to Rate Books	10,706	10,600
Rateable Value	£301,353	£287,413
A sum represented by a Penny Rate.	£1,194	£1,126
Number of Live Births (Legitimate and..		
illegitimate)	616	552
Birth-Rate per 1,000 of the population..	17.74	15.70
Number of deaths...	406	357
Death-Rate (actual) per 1,000 of the... . .	11.29	10.18
Death-Rate for the purposes of comparison... with other districts.. . . .	10.49	9.46
Natural increase of population during the year by excess of births over deaths.	210	195
Number of Deaths of Infants (under the age.. of one year)	24	16
Infant Mortality per 1,000 live births.	37.73	28.98
Number of women dying in, or in consequence of, child-birth.. . . .	3	0
Death-Rate from Influenza per 1,000 of the population.. . . .	0.25	0.26
Death-Rate from Pneumonia (all forms) per... 1,000 of the population	0.39	0.71
Death-Rate from Bronchitis per 1,000 of the population.. . . .	0.28	0.14
Death-Rate from Measles per 1,000 of the... population.. . . .	0.00	0.03
Death-Rate from the seven principal zymotic diseases: Smallpox, Whooping Cough,.. Measles, Diarrhoea, Diphtheria, Scarlet . . . Fever, and "Fever" (Typhoid, Enteric. . . and Typhus), per 1,000 of the population.. . . .	0.08	0.08
Death-Rate from Diarrhoea and Enteritis of.. children under two years of age per 1,000. births.	0.00	0.23
Death-Rate from all forms of Tuberculosis... per 1,000 of all population	0.25	0.46
Death-Rate from Cancer per 1,000 of the... population.. . . .	1.80	1.42
Death-Rate from Heart Disease per 1,000 of.. the population...	2.88	2.09
Death-Rate from Acute and Chronic Nephritis per 1,000 of the population.	0.25	0.37

POPULATION - ASCERTAINED BY NATIONAL REGISTRATION.

As a result of the census the population of the Guildford Rural District on the night of Friday, 29th September, 1939, was approximately as follows:-

Males	17,664
Females	22,689
	<hr/>
	40,353
	<hr/>

The above figures exclude members of the fighting forces in barracks, camps, billets, etc., (and, of course, includes evacuees).

V I T A L S T A T I S T I C S.

BIRTHS.

616 live births were registered during the year as against 552 in 1938, an increase of 64.

Live births:	Male	Female	Total
Legitimate	313	276	589
Illegitimate	12	15	27
	<hr/>	<hr/>	<hr/>
	325	291	616
	<hr/>	<hr/>	<hr/>

BIRTH-RATE per 1,000 of the estimated resident population, 17.74.

The birth-rate for 1938 was 15.80. The 1939 rate thus shows a decided increase.

The graph on page 9 shows the birth-rates for the District for the last eight years, together with the birth-rates for England and Wales.

There were 20 still-births during the year, as against 16 in 1938.

Still births:	Male.	Female.	Total.
Legitimate	9	11	20
Illegitimate	-	--	--
	<hr/>	<hr/>	<hr/>
	9	11	20
	<hr/>	<hr/>	<hr/>

STILL-BIRTH RATE per 1,000 total (live and still) births, 31.43.

DEATHS.

There were 406 deaths registered during 1939 (213 male and 193 female) as against 357 for the previous year. Table 11 on page shows the principal causes of death.

DEATH-RATE per 1,000 of the estimated resident population, 11.29

After correction by the Registrar-General's factor*, 10.49

* This factor is used to correct the death-rate to what it would be were the population of the District in the same relative sex and age proportions as the country as a whole

INFANT MORTALITY

During 1939, there were 24 deaths of infants under one year of age as compared with 16 in 1938.

	Male	Female	Total.
Legitimate...	. 14	8	22
Illegitimate.	. --	2	2
	<u>14</u>	<u>10</u>	<u>24</u>

INFANT MORTALITY RATES.

	1939.	1938.
All infants per 1,000 live births.	37.73	28.98
Legitimate infants per 1,000..	.	.
legitimate live births. ...	. 36.72	30.53
Illegitimate births per 1,000.	.	.
illegitimate live births....	. 71.42	0.00
Deaths from measles (all ages)	0	1
" whooping-cough (all	.	.
ages)...	. 1	0
" diarrhoea (under 2	.	.
years of age) ...	. 2	1

MATERNAL MORTALITY.

		Rate per 1,000 total (live and still) births.
Deaths from puerperal sepsis	0	0.00
" other puerperal causes	3	4.63
	<u>3</u>	<u>4.63</u>

Table 1 below shows the birth-and-death-rates per 1,000 of the population for the District, and for England and Wales, for 1938 and 1939.

TABLE 1. COMPARATIVE BIRTH - AND DEATH - RATES.

	Annual Rates per 1,000 of the Population.						Maternal Mortality per 1,000 total Births.	
	Birth-Rate		Death-Rate		Infantile Mortality		1939	1938
	1939	1938	1939	1938	1939	1938		
Guildford R.D.	17.74	15.70	Crude 11.29 Compar- able 10.49	Crude 10.18 Compar- able 9.46	37	28	4.63	0.00
England & Wales	15.59	15.1	12.1	11.6	50	53	2.82	2.97

Table 111 on page 10 shows the birth-rates, death-rates, and analysis of mortality for certain diseases during 1939 in respect of England and Wales, London, and the Guildford Rural District.

TABLE II. CAUSES OF DEATH DURING 1939. (All Ages.)
(Figures supplied by Registrar-General)

Cause of Death.	Male	Female	Total
1. Typhoid and paratyphoid fevers	-	-	-
2. Measles	-	-	-
3. Scarlet Fever	-	-	-
4. Whooping-Cough	-	1	1
5. Diphtheria	-	-	-
6. Influenza	3	6	9
7. Encephalitis lethargica	-	-	-
8. Cerebro-spinal fever ...	1	-	1
9. Tuberculosis of respiratory system	3	5	8
10. Other tuberculous diseases	1	-	1
11. Syphilis	3	1	4
12. General paralysis of the insane, tabes dorsalis	-	-	-
13. Cancer, malignant disease	28	37	65
14. Diabetes	4	4	8
15. Cerebral haemorrhage, etc.	8	8	16
16. Heart disease	51	53	104
17. Aneurysm	3	1	4
18. Other circulatory diseases	17	12	29
19. Bronchitis	4	6	10
20. Pneumonia (all forms)	6	8	14
21. Other respiratory diseases	-	6	6
22. Peptic ulcer	5	2	7
23. Diarrhoea, etc. (under 2 years)	1	1	2
24. Appendicitis	2	-	2
25. Cirrhosis of liver ...	-	2	2
26. Other diseases of liver, etc.	-	-	-
27. Other digestive diseases	8	-	8
28. Acute and chronic nephritis	4	5	9
29. Puerperal sepsis ...	-	-	-
30. Other puerperal causes	-	3	3
31. Congenital debility, premature birth, malformations, etc.	8	7	15
32. Senility	4	9	13
33. Suicide	6	-	6
34. Other violence	15	2	17
35. Other defined diseases	28	14	42
36. Causes ill-defined or unknown	-	-	-
All Causes	213	193	406



Extension of
District 1.4.33.

Births ...	-----	=====
Deaths ...	—————	=====

TABLE 111

BIRTH-RATES, DEATH-RATES AND ANALYSIS OF MORTALITY DURING THE YEAR 1939

	Rate per 1,000 total Population	Annual Death-Rate per 1,000 Population.										Rate per 1,000 Live Births.
		All Causes	Typhoid and Paratyphoid Fevers	Smallpox	Measles.	Scarlet Fever	Whooping-Cough	Diphtheria	Influenza	Diarrhoea & Enteritis (Under 2 years)	Total Deaths under One year	
England and Wales	15.0	12.1	0.00	0.00	0.01	0.01	0.03	0.06	0.21	4.6	50	
26 County Boroughs & 124 Towns, including London	14.8	12.0	0.00	0.00	0.01	0.00	0.03	0.05	0.19	6.3	53	
48 Smaller Towns (Estimated Resident Populations 25,000 to 50,000 at Census 1931)	15.6	11.2	0.00	0.00	0.01	0.00	0.02	0.04	0.20	3.9	40	
London	12.3	11.9	0.00	0.00	0.00	0.00	0.03	0.02	0.18	8.2	48	
Guildford R.D.	17.74	10.49	0.00	0.00	0.00	0.00	0.03	0.00	0.25	3.25	38	

The maternal mortality rates for England and Wales are as follows:

(per 1,000 Live Births) Total Births

0.77
0.74
Puerperal sepsis.
Others.
Total.
2.16
2.08
2.93
2.82

GENERAL PROVISION OF HEALTH SERVICES FOR THE
AREA.

LABORATORY FACILITIES.

Pathological Examinations (carried out at the Royal Surrey County Hospital):-

		<u>1939.</u>	<u>1938.</u>
Diphtheria ...	...	72	88
Scarlet Fever ..	...	56	30
Tuberculosis ...	...	25	24
Miscellaneous ..	...	37	2
Totals ...	...	<u>190</u>	<u>144</u>

Milk Analysis. During the year, 93 samples were examined at the Royal Surrey County Hospital.

AMBULANCE FACILITIES.

The ambulance facilities remain as detailed in the Report for 1938.

NURSING IN THE HOME.

The notes contained in the 1938 Report are still applicable, although the number and distribution of Midwives varies from time to time.

CLINICS AND TREATMENT CENTRES.

Maternity and Child Welfare. Centres within the District are as set out below:-

<u>Centre.</u>	<u>Address.</u>	<u>Days of Centre.</u>
Ash	St. Peter's Church Rooms.	Every Thursday.
Ash Vale	Working Men's Club, Frimley Road.	2nd and 4th Mondays.
Ash Wyke	Village Hall, Normandy.	1st and 3rd Mondays.
Effingham	Women's Institute.	1st and 3rd Tuesdays.
Holmbury St. Mary	Holly Bush.	2nd and 4th Fridays (Voluntary Centre)
Horsley, West	Village Hall.	1st and 3rd Thursdays.
Peaslake	Old School Room.	2nd and 4th Mondays.
Puttenham	Old School Hall.	1st and 3rd Tuesdays.
Ripley	Rio Tea Rooms.	Every Tuesday.
Send	Men's Institute.	1st and 3rd Mondays.
Shalford	The Institute.	Every Wednesday.
Shere	Village Hall.	1st and 3rd Thursdays.
Worplesdon	Memorial Hall, Perry Hill.	2nd and 4th Tuesdays.
"	Church Hall, Wood Street.	2nd and 4th Thursdays.

(All these Centres are held in the afternoon.)

Ante-natal Clinics.

Ash ... 2nd and 4th Tuesdays, 2p.m.
 Godalming ... 1st and 3rd Tuesdays, 10 a.m.
 Farnham ("Brightwells"). Wednesdays at 2 p.m.
 Woking (Clarence Avenue) Fridays at 10 a.m., 2nd Monday
 at 10 a.m., and 2nd and 4th
 Wednesdays at 2 p.m.

Orthopaedic Clinic.

Royal Surrey County
 Hospital, Guildford ... Tuesday afternoon, 2.30 p.m.
 St. Nicholas' and
 St. Martin's Homes,
 Pyrford ... In-patient treatment.

The details of the other clinics and treatment centres remain unaltered from the 1938 Report.

HOSPITALS.

The hospitals serving the District are as follows:-

County Council: Warren Road Hospital, Guildford. 260 beds.

Voluntary: Royal Surrey County Hospital, 216 beds.
 Guildford.

Infectious Clandon Smallpox Isolation Hos. 37 beds.
Disease. Guildford & Godalming Joint
 Isolation Hospital. 81 beds.

MORTUARIES.

The arrangements remain as detailed in the Report for 1938.

Plans for improving the unsatisfactory Shalford Mortuary are necessarily held in abeyance during the war.

SANITARY CIRCUMSTANCES OF THE AREA.

WATER.

Water supplies were dealt with in some detail in the Annual Report for 1938, and there have been no changes of any importance since.

Analyses are made in accordance with the following general plan:-

<u>Type of supply.</u>	<u>No.</u>	<u>Chemical.</u>	<u>Bacteriological.</u>
Chlorinated supplies.	6	Quarterly.	Monthly ... 5 Quarterly .. 1
Supplies derived from chalk strata (4 of which 6 included in 'Chlorinated')		Quarterly.	All monthly.
Supplies derived from sand and gravel (2 of which included in 'Chlorinated')	9	Quarterly.	Monthly ... 2 Quarterly . 7

The importance of the strictest supervision of water supplies in war-time is recognised.

Water Supply, Wanborough Manor Estate. This water supply, which was under suspicion last year, has been carefully watched, and frequent analyses made of the water. No cause for complaint was discovered during 1939, but of course the success of the chlorination - arranged for in 1938 - depends entirely upon the careful personal supervision of the man in charge.

DRAINAGE AND SEWERAGE.

It is one of the tragedies of the war that it brings to a standstill all schemes for improvements in drainage and sewerage, no matter how urgently they are demanded. The much-needed North Western Scheme for the parishes of Ash, Worplesdon and the Tongham portion of Seale, cannot be furthered until the end of hostilities although the need for the scheme grows ever more and more apparent and more urgent. A small portion only has been undertaken, in the form of a temporary small self-contained disposal scheme for the newly-developed part of Ash Parish in the vicinity of Oxenden Road. Conditions became so serious that an immediate main drainage scheme was imperative. It is hoped that the work will be completed during the summer of 1940 and that later it can all, with the exception of the actual disposal works, be incorporated in the bigger North Western Scheme.

The Tillingbourne Valley and Peasmarsh Schemes are similarly shelved for the time being.

Drainage difficulties in all these parts are likely to become more and more serious as the population continues to increase. Especially must military billeting and the reception of civil evacuees add to our troubles, whilst shortage of labour and increasing difficulty in operating the cesspool emptying service must be anticipated. I sincerely hope that the general public will appreciate the situation and be prepared to help to the best of their ability.

The North Eastern Scheme is approaching completion, and by the end of the year many of the houses in the East Horsley parish had been connected to the sewer. The disposal works were out into operation in September, 1939. It is hoped that all the work will be completed by the summer of 1940.

CESSPOOL EMPTYING.

There are eleven cesspool emptying machines in full-time operation.

RIVERS AND STREAMS.

Complaints have been few, and no serious difficulty has been encountered.

CLOSET ACCOMMODATION.

Night soil is collected twice weekly in the parishes of Shalford, St. Martha, Albury, and Ash and Normandy.

PUBLIC CLEANSING.

The tip at Shalford is reasonably well maintained, and no complaints have been received in respect of either this or the Ash tip.

There are five machines engaged in refuse collection.

SHOPS.

During 1939 the number of inspections made by the Sanitary Inspectors under the Shops Act, 1934 was 27.

SMOKE ABATEMENT.

Smoke and objectionable smells have been complained of in the vicinity of the Gomshall Tanneries, especially in the latter part of the year. With the co-operation of the Manager, these have been reduced, it is hoped, to the minimum, but it must be realised that the tannery is working absolutely to capacity and that nuisances are consequently inevitable from time to time. The disposal of the effluent continues to present difficulties, and will continue to do so until the proposed Sewage Scheme becomes an accomplished fact.

Smoke has also been complained of from the Cartbridge Laundry, Send. Difficulties in obtaining the correct grade of fuel have been blamed, and no doubt account in great measure for the trouble. Careful attention to stoking and draught-regulation reduce the nuisance, but whilst there is any difficulty in obtaining the correct grade of Welsh steam coal complaints are liable to occur.

SWIMMING BATHS AND POOLS.

Shere Swimming Pool. This pool has been kept under observation during the summer, and samples were taken for analysis. At the beginning of the season several improvements were carried out, including the installation of water closets for men and women, the provision of an improved footbath and a shower, and extensions of the undressing accommodation.

SCHOOLS.

The sanitary conditions of the schools in general were maintained satisfactorily during the year.

It was not necessary for any schools to be closed during the year on account of infectious disease.

GIPSY ENCAMPMENTS.

The condition of the gipsies at Littlefield Common, Worplesdon, has continued to give some concern, but on account of the outbreak of war it is feared that it will be impossible to effect any radical improvement. A careful watch will, however, be maintained, and every effort made to ensure that the conditions do not become worse.

ERADICATION OF BED BUGS.

Hydrogen Cyanide Regulations.

Regulations regarding the use of hydro-cyanic gas for disinfection were issued by the Minister of Health in February. Various restrictions and safeguards are detailed, and fullest records of all fumigations carried out by this process have to be kept by the Medical Officer of Health. Two disinfections by this method was carried out in this area during the year.

H O U S I N G.

Within recent years a great deal of time has been spent on housing matters. The outbreak of war has unfortunately put an end for the time being to most schemes of development and improvement. The reception of large numbers of evacuees put a heavy strain on the available accommodation. Overcrowding cannot be prevented as in normal times, and, in some cases, houses that would have been scheduled for demolition have been patched up to ~~prevent~~ **provide** temporary additional accommodation. General observation has been kept, and will be continued to ensure, so far possible, that the general standard of housing is not allowed to deteriorate.

Number of new houses erected during the year:

- | | | | |
|---|-----|-----|-----|
| (a) Total, including numbers given separately under (b) | ... | ... | 430 |
| (b) With State Assistance under the Housing Acts: | | | |
| (1) By the Local Authority. | ... | | 128 |
| (2) By other persons or bodies | .. | | - |

INSPECTION AND SUPERVISION OF FOOD.

FOOD AND DRUGS (ADULTERATION) ACT, 1928.

This Act is administered by the Surrey County Council, and I am indebted to the County Medical Officer for the information in the table below, which shows the number of samples analysed, and action taken in respect of this District, during 1939.

Return of Samples analysed during year
ended 31st December, 1939.

Articles	Analysed			Adulterated or Deteriorated.			Prosecuted.	Convictions.
	For-mal.	In-formal.	Total.	For-mal.	In-formal.	Total.		
Milk ...	142	17	159	14	5	19	1*	-
Cream ..	-	2	2	-	1	1	-	-
Cheese .	-	1	1	-	-	-	-	-
Beer ...	5	-	5	-	-	-	-	-
Sugar .. (Demerara)	-	1	1	-	-	-	-	-
Butter .	1	-	1	-	-	-	-	-
Tinned Peeled Shrimps..	-	1	1	-	-	-	-	-
Orange Squash..	-	1	1	-	-	-	-	-
Chocolate Roll ...	1	-	1	-	-	-	-	-
Chocolate Cake ...	1	-	1	-	-	-	-	-
Drugs ..	-	1	1	-	-	-	-	-
Totals..	150	24	174	14	6	20	1	-

* Dismissed on payment of costs.

PREVALENCE OF, AND CONTROL OVER, INFECTIOUS
AND OTHER DISEASES.

GENERAL.

The total number of cases notified during the year was 106 (106 according to Registrar-General's figure, but 99 according to local figures).

The following tables compares the 1939 figures with those of 1938. The increase on the previous year is due to Measles and Whooping Cough having become notifiable. There were 27 cases of these diseases notified after the date when they were made notifiable.

Disease.	1939.	1938.	1939 Increase + Decrease -
Smallpox	-	-	-
Scarlet Fever	43	37	+6
Diphtheria	8	12	-4
Enteric Fever (including Paratyphoid)	-	-	-
Puerperal Pyrexia	3	2	+1
Pneumonia	17	12	+5
Acute Anterior Poliomyelitis ...	-	1	-1
Erysipelas	5	9	-4
Undulant Fever.	1	1	-
Cerebro-spinal Fever.	-	-	-
Malaria	1	-	+1
Dysentery	-	1	-1
Ophthalmia Neonatorum	1	-	+1
Encephalitis Lethargica	-	-	-
Measles	1	Not	
Whooping Cough	26	notif- iable.	
TOTALS	106	75	+4 ⁺

In addition, there were six Military cases: Scarlet Fever ...2
Pneumonia ... 3, Diphtheria ... 1.
(* To make the figures comparable with 1938, the measles and
whooping cough cases have been omitted from this column.)

SMALLPOX.

No cases of smallpox occurred during the year.

SCARLET FEVER.

Scarlet Fever accounted for 43 of the 106 cases, an increase of 6 on the year before, but, as reference to the graph on page 19 shows, still a very low figure compared with the past few years.

The year was remarkably free from infectious diseases. The expected epidemics resulting from a mixture of town and country children failed to materialise, although there were widespread epidemics of Chicken Pox, German Measles and Whooping Cough over the whole District. These were mild in character, and resulted in no deaths and, so far as is known, no serious or permanent disability.

The use of the 'Minor Infections' Hospitals, described under the heading "Evacuation", no doubt helped to check the development of serious cases, and to some extent prevented the spread in the households by reducing the overcrowding of children in the affected houses,

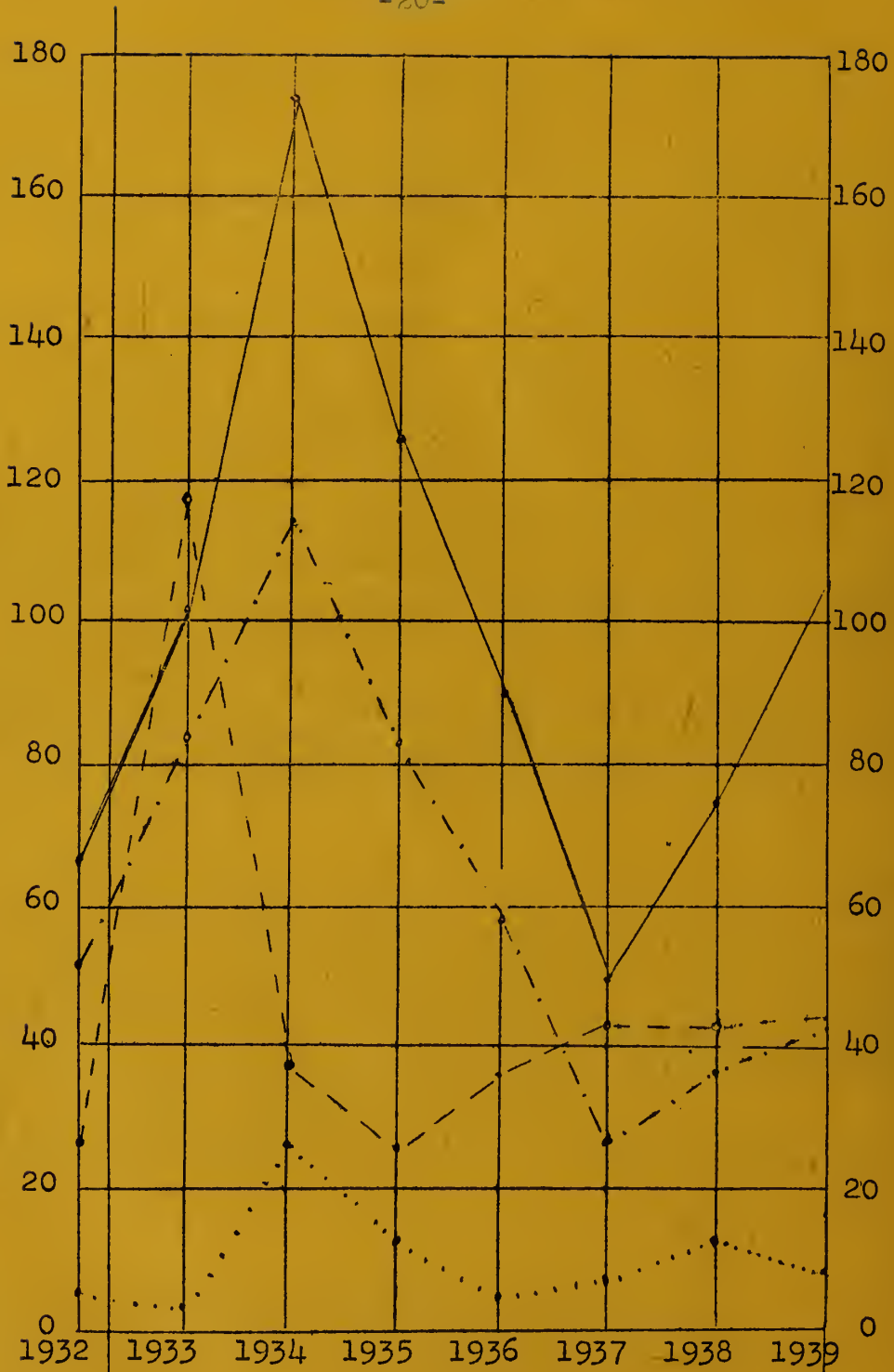
Skin diseases were prevalent at the end of the year, especially Scabies and Ringworm. This, together with an increase in the number of children affected with head lice, appears to have been a direct result of evacuation, and seems to be most difficult to eradicate.

Diphtheria Immunisation. With the assistance of the Temporary Assistant Medical Officer of Health diphtheria immunisation at the schools was carried out as in previous years. The number of children immunised was 260,

CANCER.

There were 65 deaths from malignant disease during 1939: 28 male and 37 female (according to Registrar General's figures). The age incidence of 60 of these persons whose deaths have been traced through this Department is shown in the table below:

DEATHS FROM CANCER.				1939		1938.	
				M.	F.	M.	F.
15-20 yrs.	...			=	1	=	=
20-30	...			1	-	-	-
30-40	...			-	-	-	1
40-50	...			1	4	-	1
50-60	...			3	6	6	4
60-70	...			9	12	7	8
70-80	...			9	12	7	5
Over 80 years.	...			-	2	1	2
Totals	...	...		23	37	21	21



Extension of
District 1.4.33.

Measles and Whooping
Cough became notifiable.

- = Total of Notified Infectious Diseases.
- .-.-.-.-.- = Scarlet Fever.
- = Tuberculosis.
- = Diphtheria.

TABLE 1X. NEW CASES AND MORTALITY OF TUBERCULOSIS.

Age Periods	New Cases #				Deaths #			
	Respiratory		Non-Respiratory		Respiratory		Non-Respiratory	
	Male	Female	Male	Female	Male	Female	Male	Female
0 - 1	-	1	1	1	-	-	-	-
1 - 5	-	1	1	1	-	-	-	-
5 - 15	1	1	1	4	-	-	-	-
15 - 25	3	5	1	3	-	-	-	-
25 - 35	4	10	-	1	2	3	-	-
35 - 45	-	2	-	-	-	2	-	-
45 - 55	1	2	-	1	-	-	-	-
55 - 65	-	3	-	-	2	1	-	-
65 and over	-	-	-	-	-	-	-	-
Unknown	-	-	-	-	-	-	-	-
Totals	9	24	3	9	4	6	-	-

* Thirty-four of these were primary notifications, twelve were persons from other areas who had come to reside in the Guildford Rural District during the year, There were no posthumous notifications during the year.

Ø One of these cases actually died of an intercurrent disease in 1938, but this was not discovered until June 1939.

^ The ratio of non-notified tuberculosis deaths to total tuberculosis deaths was Nil, as against 1 in 16 in 1938.

GOVERNMENT EVACUATION SCHEME.

Preparations were completed by the Chief Billeting Officer for the reception of more than 5000 evacuees from London.

Dispersal Centres were arranged in every parish in the Reception Area to which the train loads of evacuees could be taken on arrival at the station for rationing, sorting, and despatch to individual billets.

Medical arrangements were made at the station and at each of the Dispersal Centres.

At the station emergency First Aid arrangements were prepared by the Guildford Division of the St. John Ambulance Brigade, who had nurses on duty. Fortunately, very few cases required treatment of any kind.

At Dispersal Centres arrangements were made for the medical examination of every evacuee before billeting. Teams of six nurses conducted the examination, the leader being in most cases a Health Visitor loaned for the occasion by courtesy of the Surrey County Council, and in the remainder by trained Nurses. In all, 9 teams were employed, and, being mobile, were moved from Centre to Centre as required. Every arrival was examined as to general condition, presence of head or body vermin, signs of infectious or contagious disease, and any other defect or special circumstance, was noted. Medical attention was at hand for such as required it, whilst emergency sick bays in private houses were prepared in advance to receive such as it was deemed inadvisable to billet immediately.

All arrangements worked smoothly and well, due in large measure to the excellent detail preparation of the Billeting Officer and to the willing co-operation of all the staffs called on duty to assist in the reception.

The number of evacuees who actually arrived was about 2000, representing about 40 per cent. of those prepared for.

The excellent summer weather which prevailed throughout the whole period contributed to the comfort and happiness of the arrivals, and no-one could fail to be struck by the cheerfulness and excellent behaviour of the unaccompanied children who arrived, especially on the first day.

The following table shows the defects discovered at the Dispersal Centres.

CONDITION OR DISEASE.	ADULTS.	YOUNG CHILDREN (5 and under)	SCHOOL CHILDREN OR AGES UNKNOWN	TOTALS
VERMINOUS HEADS.	1	7	23	31
VERMINOUS HEADS AND BODIES.	-	-	-	-
INFECTIOUS DISEASE.	{ WHOOPING COUGH.	-	1 Query.	1
	{ CHICKEN POX.	-	3	3
	{ DIPHTHERIA.	-	1	1
	{ IMPETIGO.	-	1	1
CRIPPLES.	-	1	3	4
MINOR INJURIES (cuts, etc.)	-	-	6	6
DISCHARGING EARS, NOSE, OR SORE THROATS.	1	-	5	6
SPOTS OR RASH.	1	4	7	12
TUBERCULOSIS.	-	-	1	1
GENERAL (SORES, HEART TROUBLE, ETC.)	1	6	17	24
SPECIAL BILLETS.	2	7	11	20
TOTALS.	6	25	79	110
EXPECTANT MOTHERS.	48	-	-	48
			GRAND TOTAL	158

This medical inspection did not delay the Billeting Officers, and has been fully justified by the results. Most cases of infestation by vermin, and of contagious or infectious disease, were discovered and treatment arranged for. The size of the problem to be tackled was known at once and, knowing every case, appropriate steps were taken to deal with them. In dealing with these troubles full use was made of the services of the County Health Visitors, whose services were invaluable and at all times unsparingly given. The Warren Road County Hospital was also invaluable, especially in treating cases of scabies.

A small Emergency Hospital of 6 beds had been prepared in advance at Kingswood Hanger, Gomshall, through the generosity of Mrs. Cleverley. This was of inestimable value, and treated all those cases who, though unsuitable for billeting, were yet not sufficiently serious to occupy beds in the Royal Surrey County Hospital. From the commencement of

evacuation until the end of the year this little hospital was of the greatest assistance. After the first few days similar accommodation was prepared in the adjoining district of Hambledon Rural and became available for the two Rural Districts.

A note of the staff and of the numbers of patients treated at Kingswood Hanger, is given below:-

Staff:

Medical Officer	...	Dr. Watson.
Matron	...	Mrs. Cleverley (voluntary).
Sister	...	Mrs. Griffin (Red Cross people assisted voluntarily when Sister was off duty).
Domestic help	...	The gardener's wife daily and voluntarily.

The number of patients treated up to the 31st December, 1939, is as follows:-

<u>Reason for Admission.</u>	<u>Number of cases.</u>
Enuresis	2
Infected gland.	2
Old Poliomelitis.	1
Rickets and M.D.	2
Hysteria.	2
Dental abscess.	1
Sprained ankle.	1
Concussion.	2
Thread worms.	3
Convalescent cases.	3
Long glass puncture wound of left leg.	1
Haem. Strept. pemphigus.	1
Vomiting - ?cause.	1
Fractured leg.	1
Cervical adenitis.	1
Croup.	1
Discharging ear.	2
Inflamed ears.	1
Carbuncle.	1
Bilateral Upper Lobar Pneumonia.	1
TOTAL	30

Many children were found to be unsuitable for billeting in private-houses, either from their habits, temperaments, or inability to conform to the discipline of a well-ordered home. It was found that these children were happier when placed in groups and kept in hostels. Discipline could be better maintained and the children benefited by the training. As soon as possible, Denbigh House, Shaftord, was prepared to receive cases of this type. Accommodation was provided for some 20 children, and, small as this was, the institution proved invaluable in solving many of our worst billeting problems. Later it was learned that Guildford Borough had accommodation of a similar type available at Ardmere House, and accordingly Denbigh was closed.

On the Sunday morning, the third day of the evacuation, numbers of expectant mothers arrived, and though the numbers were not so large as had been expected, it was found impossible to billet them satisfactorily in ordinary households. It

was obvious that a hostel was the only solution, and Gosden House, Shalford, was accordingly requisitioned and equipped, the women moving in on the same day. Gosden House is a residential school for orphans, and had just completed a new wing with accommodation ideally suitable for 60 or more expectant mothers. Hasty as was the improvisation with the generous help of the Superintendent and Matron of the orphanage, a very comfortable hostel was established. The women were contented and happy, and there is no doubt that hostels of this type are the only solution to the evacuation of expectant mothers. Later, when the children returned from their summer holidays, a suitable house, Whitnorth, was found close by, and the hostel was transferred. The women took up residence some three weeks before the expected date of confinement, and were transferred to Warren Road Maternity Hospital as necessary. After confinement they returned to Whitnorth with their babies for a few weeks until suitable billets were made available. This arrangement worked admirably, and no serious difficulties were experienced. It suited the mothers, and the householders welcomed it.

In November the number of mothers diminished, and the continuance of such an expensive house as Whitnorth had to be seriously re-considered. The Borough of Guildford had a similar type of hostel, and were finding that their numbers were diminishing in the same way as our own. Accordingly, on the 27th November, the two institutions were combined, and the mothers from Whitnorth transferred to Elford, Albury Road, Guildford.

Unfortunately, the great majority of these mothers have since returned to London. With many the calls of duty to their husbands made the choice one of the greatest difficulty. There can be no doubt that many husbands suffered severely through the temporary loss of wives and families, and in many others financial difficulties made the return of the wives imperative. In others the return of the wives was necessary to prevent the complete break-up of the home. By the end of the year only a few mothers were left in the district out of the 48 who originally arrived. Every effort was made to keep them and to make them comfortable. Their lot was not an easy one, with duties to their families and to their husbands, whilst it is obvious that the difficulties of settling this type of evacuee in another person's home are infinitely greater than those met with in the case of children.

In some cases mothers were willing to leave their children in the District provided they could be satisfactorily accommodated. As time passed and the flow of mothers back to London increased, it seemed wiser to concentrate on an effort to keep the children in safety and allow their mothers to return. School children can be billeted, satisfactorily in many cases, but it is well-nigh impossible to billet young children or infants with confidence and satisfaction to both mother and foster-mother. The establishment of a residential nursery was obviously the only satisfactory way, and as the numbers of suitable children increased, such a home became rapidly an urgent necessity.

The reception of children below school age presented another special problem. When accompanied by mothers it was possible, though usually difficult, to billet them in the ordinary way. The majority of mothers in this category returned home before many weeks had passed. In some cases they were willing to leave their children if suitable billets were provided. The average householder was, however, loth to accept the responsibility of taking charge of such young children, and many of them did perforce return to London.

The provision of Residential Nurseries eventually provided the proper solution; and had they been available from the commencement, there is little doubt but that the majority of these tiny children would have been retained in the Reception Areas.

One Day Nursery - the Rotherhithe Day Nursery - was sent down to its summer holiday quarters at Fairhaven, Holmury St. Mary, and transformed into a Residential Nursery. There were some 23 children, all between the ages of 2 and 3 years. Fairhaven was a group of wooden huts, admirably placed, remote from towns, and was eminently suitable for summer holiday residence. The prospect of permanent residence, especially having regard to the oncoming winter, made it urgently necessary to find more suitable accommodation. Eventually a suitable house was found at Burnham, Shalford, and the whole nursery transferred on 27-10-39. Burnham provides accommodation for 30 children, and that number was made up from other young children for whom suitable billets could not be found. Great credit is due to the Matron, who carried on under the greatest difficulties. The children were at all times extremely happy and improved in health enormously. Our chief difficulty was to limit the number of children admitted to that for which the accommodation was really suitable, and before long it became apparent that a second Residential Nursery would have to be opened.

In these circumstances Whitnorth, now closed as a hostel for Expectant Mothers, was again investigated and found eminently suitable for children. Arrangements were made for the transfer of 16 toddlers from unsuitable quarters at Edenbridge whither they had been evacuated as a Day Nursery from Southwark. The number speedily grew to the maximum permissible, namely, 40, and by the beginning of 1940 there was actually a waiting list for admission.

These two nurseries, Burnham and Whitnorth, have been one of the happiest and most completely satisfying features of the whole Evacuation Scheme. The change in the children, within the first four weeks even, is almost incredible. Pale cheeks become filled out and healthy colour takes the place of pallor, listlessness gives way to overflowing vitality, and the gain in weight averages 2 lbs. in the first month for children of 2 to 3 years of age. It is to be hoped that one good effect of the scheme will be, continuance of such institutions so that town children may benefit from even brief stays in such holiday nurseries.

Mothers with families were another group not suitable for billeting on the ordinary householder. Only in exceptional circumstances can complete harmony exist with two families living under one roof, sharing the same rooms, both suffering inconvenience and discomfort from restricted liberty and loss of privacy. Various expedients were tried, but the majority of the mothers returned to London before many weeks had passed. In some cases they were willing to leave their children in suitable billets, but in many they were temperamentally unsuited to take part in the evacuation scheme at all.

The health of the evacuated children continued good, and the epidemics so surely expected failed to materialise either amongst the newcomers or amongst the native population. Many cases of illness did occur, both minor infectious troubles, accidents, and illnesses, although, rather unexpectedly, it was the evacuees who suffered more than our own children.

Without question, one of the greatest surprises and certainly the greatest disclosure has been the number of children subject to bed-wetting. The magnitude of the problem could never have been anticipated, and for many months the proper treatment and disposal of these children was one of our greatest problems. No doubt in many cases the psychological reaction from the disruption of home life and transplantation to new surroundings and conditions was largely responsible, but this type of case responded to treatment rapidly and was for the most part eliminated within the first few weeks. In a minority some physical causes could be discovered and rectified. There remained the majority in which the cause could be fairly and accurately described as lack of home training. Under discipline and care the younger ones were cured within a reasonable time, but older children had these unfortunate habits too deeply ingrained to be easily altered. Householders stood the strain in most cases in a remarkable way, and appealed for assistance only when every expedient had been tried and their patience beyond endurance.

For these cases institutional treatment was the only possible resort. In the beginning Warren Road County Hospital was able to take the worst of our cases, but was crowded out within a few days. Hostels were established within our own district as became necessary and several cases were transferred to other institutions wherever accommodation could be found. By Christmas the worst of the trouble was over. Many had, of course, returned to London but the majority were more or less successfully cured. It was found that some responded to institutional treatment within a few days, but that unless kept for some weeks, relapses were inevitable.

CHIEF SANITARY INSPECTOR'S ANNUAL REPORT.

To the Chairman and Members of the
Guildford Rural District Council.

Mr. Chairman, Ladies and Gentlemen,

I beg to submit my Annual Report upon the work carried out by my department during the year ending 31st December, 1939.

In view of the urgent nature of duties falling upon the department as a result of the outbreak of war, and the request of the Ministry of Health that the length of annual reports in general should be curtailed, I give below a summary of the work covered during the year.

REPORT ON THE ADMINISTRATION OF THE FACTORY AND WORKSHOPS ACT, 1901, IN CONNECTION WITH WORKSHOPS AND WORKPLACES.

1. Inspection of Factories, Workshops and Workplaces.

Premises.	Number of		
	Inspections.	Written Notices.	Prosecutions.
FACTORIES (with mechanical power)	4	-	-
FACTORIES (without mechanical power)	2	-	-
OTHER PREMISES under the Act (including works of building and engineering construction but not including outworkers' premises)	12	-	-
Total ...	18	-	-

2. Defects Found in Factories, Workshops and Workplaces.

Particulars	Defects Found.	Defects Remedied.
SANITARY CONVENIENCES (unsuitable or defective)	-	-
OTHER OFFENCES	-	-
Total ...	-	-

INSPECTION AND SUPERVISION OF FOOD.

MILK SUPPLY.

The number of dairymen registered in the District is summarised overleaf. Producers of milk have increased from 69 to 72, producer-retailers and retailers of milk remain as before. The entire total is now 169.